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Examiner G org R. Koch  
Group Art Unit: 1734

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Attorney Docket No. FGT-10802/44

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Daniel Joseph Ondrus

Serial No.: 09/544,423

Group Art Unit: 1734

Filing Date: April 6, 2000

Examiner: George R. Koch

For: METHOD FOR FORMING A JOINT

TO: Examiner George R. Koch

FROM: Beverly M. Bunting

PAGES: 16, including this cover sheet

DOCUMENT(S) BEING FAXED: Amendment, Amendment Transmittal Sheet


CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this document for Application Serial Number **09/544,423** is being facsimile transmitted to the Patent and Trademark Office fax number **(703) 305-7718**, Attention **Examiner George R. Koch**, Group **1734**, on **April 29, 2003**.

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<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>			Docket No. <b>FGT-10802/44</b>	
Applicant(s): <b>Daniel J. Ondrus</b>				
Serial No. <b>09/544,423</b>	Filing Date <b>April 6, 2000</b>	Examiner <b>George R. Koch</b>	Group Art Unit <b>1734</b>	
Invention: <b>METHOD FOR FORMING A JOINT</b>				
<b>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</b>				
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.				
<b>CLAIMS AS AMENDED</b>				
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE
TOTAL CLAIMS	12	21	0 x	\$18.00
INDEP. CLAIMS	2	3	0 x	\$84.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>				<b>\$0.00</b>
 <input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. 07-1180 in the amount of _____ A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 07-1180 A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.				
 Signature			Dated: <b>4-29-03</b>	
<b>BEVERLY M. BUNTING, REG. NO. 36,072</b> <b>GIFFORD, KRASS, GROH, SPRINKLE,</b> <b>ANDERSON &amp; CITKOWSKI, PC</b> <b>280 N. OLD WOODWARD AVE., STE. 400</b> <b>BIRMINGHAM, MI 48009</b> <b>(248) 647-6000</b>				
<div style="border: 1px solid black; padding: 5px;"><p>I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.</p><p style="text-align: center;">_____ Signature of Person Mailing Correspondence</p><p style="text-align: center;">_____ Typed or Printed Name of Person Mailing Correspondence</p></div>				
cc:				